

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Fighting for Ohio Fund		FEC IDENTIFICATION NUMBER ▼ C C00573014	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Main Street Media Group		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 22 / 2016	
Mailing Address PO Box 25093		Amount 698952.66	
City Alexandria	State VA	Zip Code 22313	Transaction ID : SE.4511
Purpose of Expenditure Advertising - TV		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 08 / 16 / 2016
Name of Federal Candidate TED STRICKLAND		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		7183901.99	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee McCarthy Hennings Whalen, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 22 / 2016	
Mailing Address 1850 M St NW Ste 235		Amount 16262.69	
City Washington	State DC	Zip Code 20036	Transaction ID : SE.4513
Purpose of Expenditure Advertising - Production		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 08 / 17 / 2016
Name of Federal Candidate TED STRICKLAND		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		7200164.68	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	715215.35
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	715215.35

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Christopher M Marston
[Electronically Filed]

Date

 MM / DD / YYYY
08 / 24 / 2016

Signature